PAGE 1/7

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. HOUSE CONSERVATIVES FUND 228 S. Washington St., Ste. 115 ADDRESS (number and street) (Check if address is changed) Alexandria 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS llisker@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.houseconservatives.com (Check if address is changed) DATE 07 2015 C00326439 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Lisa Lisker Type or Print Name of Treasurer Lisa Lisker [Electronically Filed] 10 08 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE				
Car	ndidate	lidate Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Nam Cand	e of didate					
	didate y Affiliatio	on Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of didate					
Par	ty Con	nmittee:				
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party.			
Poli	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected organization is a			
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party			
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Join	t Fund	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

FEC Form 1 (Revised 02	2/2009)	 Page 3
Write or Type Committee Name		i age v
	ERVATIVES FUND	
		tivo or Loadorchin DAC Sponsor
-	ganization, Affiliated Committee, Joint Fundraising Representa	live, or Leadership PAC Sponsor
ROGER WILLIAMS		
	P.O. BOX 91061	
Mailing Address		
	AUSTIN	78709
	CITY STAT	E ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Repres	sentative X Leadership PAC Sponsor
 Custodian of Records: Identi books and records. 	ify by name, address (phone number optional) and position of the	he person in possession of committee
Lisa Lisker Full Name		
	228 S. Washington St., Ste. 115	
Mailing Address		
		20244
	Alexandria	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	703 - 549 - 7705
8. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the commissistant treasurer).	ittee; and the name and address of
Full Name Lisa Lisker		,
of Treasurer		
Mailing Address	228 S. Washington St., Ste. 115	
1		
	Alexandria VA	22314
1	CITY STATE	ZIP CODE
Title or Position		

FEC For r	m 1 (Revised 02/2009)	Page 4				
Full Name of Designated Agent	Keith Davis					
Mailing Address	228 S. Washington St., Ste. 115					
	Alexandria , VA , 22314					
	CITY STATE ZI	P CODE				
Title or Position Assistant Treas		9				
	r Depositories: List all banks or other depositories in which the committee deposits funds, holds a oxes or maintains funds.	accounts, rents				
Name of Bank,	Depository, etc.					
	Wells Fargo					
Mailing Address	P.O. Box 563966					
	Charlotte NC 28256					
	CITY STATE Z	P CODE				
Name of Bank, Depository, etc.						
	Centra Bank					
Mailing Address	18750 North Pointe Dr.					
	Hagerstown MD 21742					
	CITY STATE Z	P CODE				

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

Amended to update Leadership PAC Sponor to Congressman Roger Williams. This change was effective as of March 1, 2015.

Form/Schedule: Transaction ID:

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 6 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. 14785 Forest Rd. Mailing Address 24551 Forest CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. ı United Bank 500 Virginia St., East Mailing Address PO Box 393 25322 WV Charleston CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number